2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06280

FILED Mar 05, 2009 Secretary of State

Entity Name: TERRA MAR VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
4383 U.S. EDGEWA	HWY# 1 TER, FL 32141			
Current Mailing Address:		New Mailing Address:		
P.O. BOX EDGEWA	303 TER, FL 32132			
FEI Number	: 59-2516358	FEI Number Applied For()	FEI Number Not Applica	ble () Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and A	ddress of New Registered Agent:
TAYLOR, 111 OAK S EDGEWA		US		
	e named entity s e of Florida.	ubmits this statement for the	ourpose of changing its r	registered office or registered agent, or both,
n the State	e of Florida.	ubmits this statement for the	ourpose of changing its r	registered office or registered agent, or both,
n the Stat	e of Florida. RE:	ubmits this statement for the control of the control of the control of Registered Ag		registered office or registered agent, or both, Date
in the State	e of Florida. RE:	c Signature of Registered Ag	ent	
n the State BIGNATUI DFFICER Fitle: Name: Address:	e of Florida. RE: Electron S AND DIRECT	c Signature of Registered Ag F ORS: Delete TH FER DRIVE N	ent	Date
in the State	e of Florida. RE: Electron S AND DIRECT DS () RUSSELL, JUDI 133- INDIAN RIV EDGEWATER, F	c Signature of Registered Ag FORS: Delete TH FER DRIVE N FL 32141 Delete ID AY	ent ADDITIONS/ Title: Name: Address:	Date CHANGES TO OFFICERS AND DIRECTOR
in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIRECT DS () RUSSELL, JUDI 133- INDIAN RIN EDGEWATER, F CD () SANDERS, DAV 4347 CEDAR W EDGEWATER, F	c Signature of Registered Ag FORS: Delete TH /ER DRIVE N FL 32141 Delete ID AY FL 32141 Delete ED J VER DR.W.	ADDITIONS/A Title: Name: Address: City-St-Zip: Title: Name: Address:	Date CHANGES TO OFFICERS AND DIRECTOR () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD J DYJAK DT 03/05/2009